ARIZONA STATE BOARD OF HEALTH  BUREAU OF VITAL STATISTICS ORIGINAL CERTIFICATE OF BIRTH  County Registrar No.  Local Registrar No.  Loc	PLACE OF BIRTH	C Do	ADD OF HEALTH
State Index No. 19  ORIGINAL CERTIFICATE OF BIRTH  Occurs Registrar No.  Local Registrar No.  Occurs Registrar No.  It child is not yet named, make is supplemental report, so directed.  It child is not yet named, make is supplemental report, so directed.  It child is not yet named, make is supplemental report, so directed.  It child is not yet named.  It nonresident, give place and statis highly year.  It. Residence (Usual place of abode)  It nonresident, give place and statis highly year.  It. Age at last birthday. 2 D. (Tears)  It. Age at last	County of Gila	ARIZONA STATE BO	ARD OF MEALIN
tity of			
No.   No.   No.   No.   Its birth occurred in a hospital or institution, give its NAME instead of street and number)   1th occurred in a hospital or institution, give its NAME instead of street and number)   1th occurred in a hospital or institution, give its NAME instead of street and number)   1th occurred in a hospital or institution, give its NAME instead of street and number)   1th occurred in a hospital or institution, give its NAME instead of street and number)   1th occurred in a hospital or institution, give its NAME instead of street and number)   1th occurred in a hospital or institution, give its NAME instead of street and number)   1th occurred in a hospital or institution, give its NAME instead of street and number)   1th occurred in a hospital or institution, give its NAME instead of street and number)   1th occurred in a hospital or institution, give its NAME instead of street and number)   1th occurred in a hospital or institution, give its NAME instead of street and number)   1th occurred in the street of supplemental report and invested in the street of supplemental report and invested in the street of birth of street and number)   1th occurred in the street of birth of child herein (b)   1th occurred in the street of birth of child herein (c)   1th occurred industry   1th occurred in	•	ORIGINAL GERTIFICATE OF SILLIN	
Full name of child Robert Cycle Colling  Sex of Child  To be answered ONLY In event of planal births.  FATHER  Full name Robert Colling  Residence (Usual place of abode) If nonresident, give place and state be, any It. Age at last birthday 24 (Years)  It. Age at last birthday 24 (Years)  (State or country)  12. Birthplace (city or place) (State or country)  13. Occupation  Nature of industry  Month of child herein (b) Born alive and now thing DML 21  CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*  CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*  over the country of the show other should make this return. A stillborn child, who was form alive or stillborn.  Filed  Fil		No	St. Ward  e its NAME instead of street and number)
Sex of Child To be answered ONLY i. Twin, triplet or other 18. Legitimate? The partier of plaral birth.  S. No., in order of birth 19 of b	Plet	Clude Callins	is upplemental report, as directed.
Full name Robert Collino  15. Residence (Usual place of abode) Clave (Usual place of abode) (Usu	Sex of Child To be answered ONL in event of plural	Y 4. Twin, triplet or other 6. Legitimate	7. Date aug. 28. 1925
15. Residence (Usual place of abode)  If nonresident, give place and state be, and .  10. Color or race  11. Age at last birthday 2 4 (Years)  12. Birthplace (city or place) (State or country)  13. Occupation  Nature of industry  Nature of industry  Nature of industry  Nature of industry  CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE  CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE   CYPHON there was no attending physician or midwife, then the father, householder, etc., about make this return. A stillborn alive or supplemental report  Month, day, year.  15. Residence (Usual place of abode)  If nonresident, give place and state be, and .  If nonresident, give place and state be, and .  If nonresident, give place and state be, and .  If nonresident, give place and state be, and .  If nonresident, give place and state be, and .  If nonresident, give place and state be, and .  If nonresident, give place and state be, and .  If nonresident, give place and state be, and .  If nonresident, give place and state be, and .  If nonresident, give place and state be, and .  If nonresident, give place and state be, and .  If nonresident, give place and state be, and .  If nonresident, give place and state be, and .  If nonresident, give place and state be, and .  If nonresident, give place and state be, and .  If nonresident, give place and state be, and .  If nonresident, give place and state be, and .  If nonresident, give place and state be, and .  If nonresident, give place and state be, and .  If nonresident, give place and state be, and state be, and state be, and .  If nonresident, give place and state be, and .  If nonresident, give place and state be, and .  If nonresident, give place and state be, and .  If nonresident, give place and state be, and .  If nonresident, give place and state be, and .  If nonresident, give place and state be, and .  If nonresidents, give place and state be, and .  If nonresidents, give place and state be, and .  If nonresidents, and .  If nonresidents, and .  If nonresidents, and .  If n	3. FATHER	14.	
15. Residence (Usual place of abode)  If nonresident, give place and state of the nonresident the nonresiden	Full name Robert Coll	Wis Full maiden name	la miller
10. Color or race  White  11. Age at last birthday 24 (Years)  12. Birthplace (city or place)  (State or country)  13. Occupation  Nature of industry  Nature of industry  (State or country)  14. Born alive and now living DMC 21. Were precautions taken against opher than including this child, born alive but now dead AMM 21. Were precautions taken against opher than including this child, consider that I attended the birth of this of this of this of this of this of this child, who was form alive or stillborn.  (State or country)  19. Occupation  Nature of industry  Nature of industry  Nature of industry  (State or country)  19. Occupation  Nature of industry  (State or country)  19. Occupation  Nature of industry  (State or country)  19. Occupation  Nature of industry  (CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE's Alice of this child, who was form alive or stillborn.)  (State or country)  19. Occupation  Nature of industry  (CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE's Alice or stillborn.)  (State or country)  19. Occupation  Nature of industry  (CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE's Alice or stillborn.)  (State or country)  19. Occupation  Nature of industry  (Physician or states above states, and the states are states.  (Physician or states are states, and the states are states, and the states are states.  (Physician or states are states, and the states are states, and the states are states.  (Physician or states are states, and the states are states, and the states are states.  (Physician or states are states, and the states are states, and the states are states.  (Physician or states are states, and the states are states, and the states are states.  (Physician or states are states.  (Physician or states are states.  (Physician or	9. Residence	15. Residence (Usual place of	abode) The he any.
12. Birthplace (city or place)  (State or country)  13. Occupation  Nature of Industry  Nature of industry  (State or country)  14. Directified and including this child,  CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE?  Active that I attended the birth of this child, who was shown as no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn is one that neither breathes nor shows other without make this return. A stillborn is one that neither breathes nor shows other supplemental report  Month, day, year.  18. Birthplace (city or place)  (State or country)  19. Occupation  Nature of industry  Housewill  (State or country)  19. Occupation  Nature of industry  Housewill  (Physician physician or stillborn.)  19. Occupation  Nature of industry  Housewill  (State or country)  19. Occupation  Nature of industry  Housewill  (Physician physician or state of this child, who was physician or stillborn.)  19. Occupation  Nature of industry  Housewill  (Physician physician physician or shows other shows other should make this return. A stillborn is one that neither breathes nor shows other shows other shows other shows other shows other supplemental report  Month, day, year.	10. Color or race	16. Color or race	V
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